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CONFIRMATION NO. 4553

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/647,948		424	3769	J07-004

APPLICANTS

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**** CONTINUING DATA *******
**** FOREIGN APPLICATIONS *******
**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY ****

11/18/2003

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> AF Initials	NY	3	34	12

ADDRESS

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 Bridgeport, CT 06605-1601
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TITLE

Skin injury or damage prevention method using optical radiation

FILING FEE RECEIVED 1868	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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